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16698Please type a plus sign (+) inside this box → Based on PTO/SB/05
OMB 0651-0032

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| | | |
|---|--|--|
| UTILITY PATENT APPLICATION TRANSMITTAL | | Attorney Docket No. 01-612 |
| | | First Inventor or Application Identifier NOMURA et al. |
| | | Title MOTOR CONTROL APPARATUS |
| | | Express Mail Label No. _____ |

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

U.S.P.T.O.
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17548
031604

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|---|--|---|--|
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | | ADDRESS TO: Commissioner for Patents Mail Stop Patent Application Alexandria, VA 22313-1450 | |
| 1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> | | 5. <input type="checkbox"/> Microfiche Computer Program (Appendix) | |
| 2. <input checked="" type="checkbox"/> Specification [Total Pages 40] <ul style="list-style-type: none"> -Descriptive title of the Invention -Cross Reference to Related Applications -Background of the Invention -Summary of the Invention -Brief Description of the Drawings -Detailed Description of the Preferred Embodiment -Claims -Abstract of the Disclosure | | 6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies | |
| ACCOMPANYING APPLICATION PARTS | | | |
| 7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) Assignee: DENSO CORPORATION | | | |
| 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney | | | |
| 9. <input type="checkbox"/> English Translation Document (if applicable) | | | |
| 10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations | | | |
| 11. <input type="checkbox"/> Preliminary Amendment | | | |
| 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(should be specifically itemized)</i> | | | |
| 13. <input type="checkbox"/> *Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, (PTO/SB/09-12) <input type="checkbox"/> Status still proper and desired | | | |
| 14. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> | | | |
| 15. <input type="checkbox"/> Other: | | | |

***NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28)**

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment: Continuation Divisional Continuation-in-part (CIP)

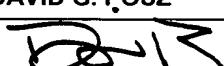
of prior application No: _____

Prior application information: Examiner _____

Group/Art Unit: _____

For **CONTINUATION or DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.**17. CORRESPONDENCE ADDRESS**

| | | | | | |
|---|-----------|--|------------------------------------|---|--|
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label | | 23400 <i>(Insert Customer No. or Attach bar code label here)</i> | | <input type="checkbox"/> Correspondence address below | |
| Name | | | | | |
| Address | | | | | |
| City | State | Zip Code | | | |
| Country | Telephone | Fax | (703) 707-9110 (703) 707-9112 | | |

| | | | | |
|-------------------|---|--|-----------------------------------|-----------------------|
| Name (Print/type) | DAVID G. POSZ | | Registration No. (Attorney/Agent) | 37,701 |
| Signature |  | | Date | March 16, 2004 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Mail Stop Patent Application, Arlington, VA 22202.

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)**810**

Complete if Known

| | |
|----------------------|-----------------------|
| Application Number | |
| Filing Date | March 16, 2004 |
| First Named Inventor | NOMURA et al. |
| Examiner Name | |
| Art Unit | |
| Attorney Docket No. | 01-612 |

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account

Deposit Account Number **50-1147**
 Deposit Account Name **POSZ & BETHARDS, PLC**

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | Small Entity | Fee Description | Fee Paid |
|--------------|--------------|-----------------------------|------------|
| 1001 | 770 | 2001 Utility filing fee | 770 |
| 1002 | 340 | 2002 Design filing fee | |
| 1003 | 530 | 2003 Plant filing fee | |
| 1004 | 770 | 2004 Reissue filing fee | |
| 1005 | 160 | 2005 Provisional filing fee | |

SUBTOTAL (1) (\$) **770**

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Total Claims | Extra Claims | Fee from below | = | Fee Paid |
|--------------------|--------------|----------------|---|-----------|
| 4 | -20**= | 0 | x | 18 |
| Independent Claims | 2 | -3***= | 0 | 0 |

Multiple Dependent

| Large Entity | Small Entity | Fee Description | Fee Paid |
|--------------|--------------|--|----------|
| 1202 | 18 | 2202 9 Claims in excess of 20 | |
| 1201 | 86 | 2201 43 Independent claims in excess of 3 | |
| 1203 | 290 | 2203 145 Multiple dependent claim, if not paid | |
| 1204 | 86 | 2204 43 **Reissue independent claims over original patent | |
| 1205 | 18 | 2205 9 **Reissue claims in excess of 20 and over original patent | |

SUBTOTAL (2) (\$) **0**

** or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity Small Entity

| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid |
|----------|----------|----------|----------|--|----------|
| 1051 | 130 | 2051 | 65 | Surcharge – late filing fee or oath | |
| 1052 | 50 | 2052 | 25 | Surcharge – late provisional filing fee or cover sheet | |
| 1053 | 130 | 1053 | 130 | Non-English specification | |
| 1812 | 2,520 | 1812 | 2,520 | For filing a request for ex parte reexamination | |
| 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | |
| 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action | |
| 1251 | 110 | 2251 | 55 | Extension for reply within first month | |
| 1252 | 420 | 2252 | 210 | Extension for reply within second month | |
| 1253 | 950 | 2253 | 475 | Extension for reply within third month | |
| 1254 | 1,480 | 2254 | 740 | Extension for reply within fourth month | |
| 1255 | 2,010 | 2255 | 1005 | Extension for reply within fifth month | |
| 1401 | 330 | 2401 | 165 | Notice of Appeal | |
| 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal | |
| 1403 | 290 | 2403 | 145 | Request for oral hearing | |
| 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding | |
| 1452 | 110 | 2452 | 55 | Petition to revive – unavoidable | |
| 1453 | 1,330 | 2453 | 665 | Petition to revive – unintentional | |
| 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) | |
| 1502 | 480 | 2502 | 240 | Design issue fee | |
| 1503 | 640 | 2503 | 320 | Plant issue fee | |
| 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | |
| 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | |
| 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | |
| 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | |
| 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) | |
| 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)**(\$ 40)**

SUBMITTED BY

Complete (if applicable)

| | | | | | |
|-------------------|---|--------------------------------------|---------------|-----------|-----------------------|
| Name (Print/Type) | DAVID G. POSZ | Registration No. (Attorney/Agent) | 37,701 | Telephone | (703) 707-9110 |
| Signature |  | | | Date | March 16, 2004 |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.